Bureau of Health Care Quality and Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	NVS2980AGZ	A. BUILDING _____ B. WING _____	02/25/2010

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
DESERT ROSE HOMES LLC	271 EAST DESERT ROSE HENDERSON, NV 89015

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Y 000	Initial Comments The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws. This Statement of Deficiencies was generated as a result of an annual State Licensure survey conducted in your facility on 2/25/10. This State Licensure survey was conducted by the authority of NRS 449.150, Powers of the Health Division. The facility is licensed for ten Residential Facility for Group beds which provide care to persons with Alzheimer's disease, Category II residents. The census at the time of the survey was two. Two resident files were reviewed and four employee files were reviewed. One discharged resident file was reviewed. The facility received a grade of D. The following deficiencies were identified:	Y 000		
Y 103 SS=F	449.200(1)(d) Personnel File - NAC 441A / Tuberculosis NAC 449.200 1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include: (d) The health certificates required pursuant to chapter 441A of NAC for the employee.	Y 103		

If deficiencies are cited, an approved plan of correction must be returned within 10 days after receipt of this statement of deficiencies.

TITLE (X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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Y 103	Continued From page 1 This Regulation is not met as evidenced by: Based on record review on 2/25/10, the facility failed to ensure 1of 4 employees complied with NAC 441A.375 regarding tuberculosis (TB) testing for the protection of all residents (Employee #1). This was a repeat deficiency from the 3/13/09 State Licensure survey. Severity: 2 Scope: 3	Y 103		
Y 178 SS=D	449.209(5) Health and Sanitation-Maintain Int/Ext NAC 449.209 5. The administrator of a residential facility shall ensure that the premises are clean and that the interior, exterior and landscaping of the facility are well maintained. This Regulation is not met as evidenced by: Based on observation on 2/25/10, the facility failed to ensure the premises was clean and well maintained. Lint, dirt, and rags were observed behind the laundry room dryer. Severity: 2 Scope: 1	Y 178		
Y 250 SS=D	449.217(1) Kitchens-Equipment works; Clean and Sanitary NAC 449.217	Y 250		

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Y 250	Continued From page 2 1. The equipment in a kitchen of a residential facility and the size of the kitchen must be adequate for the number of residents in the facility. The kitchen and the equipment must be clean and must allow for the sanitary preparation of food. The equipment must be in good working condition. This Regulation is not met as evidenced by: Based on observation and interview on 2/25/10, the facility did not ensure the oven and exhaust hood were clean. Severity: 2 Scope: 1	Y 250		
Y 320 SS=D	449.220(1) Bedroom Doors - Locks NAC 449.220 1. A bedroom door in a residential facility which is equipped with a lock must open with a single motion from the inside unless the lock provides security for the facility and can be operated without a key or any special knowledge. This Regulation is not met as evidenced by: Based on observation on 2/25/10, the facility failed to ensure 2 of 10 bedroom doors equipped with a lock did not require a key on the inside to unlock the door. Severity: 2 Scope: 1	Y 320		

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Y 693	Continued From page 3	Y 693		
Y 693 SS=D	449.2712(2) Oxygen-Caregiver monitor resident ability NAC 449.2712 2. The caregivers employed by a residential facility with a resident who requires the use of oxygen shall: (a) Monitor the ability of the resident to operate the equipment in accordance with the orders of a physician. (b) Ensure That: (1) The resident's physician evaluates periodically the condition of the resident which necessitates his use of oxygen; (2) Signs which prohibit smoking and notify persons that oxygen is in use are posted in areas of the facility in which oxygen is in use or is being stored; (3) Persons do not smoke in those areas where smoking is prohibited; (4) All electrical equipment is inspected for defects which may cause sparks. (5) All oxygen tanks kept in the facility are secured in a stand or to a wall; (6) The equipment used to administer oxygen is in good working condition; (7) A portable unit for the administration of oxygen in the event of a power outage is present in the facility at all times when a resident who requires oxygen is present in the facility; and (8) The equipment used to administer oxygen is removed from the facility when it is no longer needed by the resident.	Y 693		

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Y 693	Continued From page 4 This Regulation is not met as evidenced by: Based on observation on 2/25/10, the facility failed to secure oxygen tanks in a rack or to the wall. Two unsecured oxygen tanks were observed in the closet of bedroom #3. Severity: 2 Scope: 1	Y 693		
Y 895 SS=C	449.2744(1)(b)(1) Medication / MAR NAC 449.2744 1. The administrator of a residential facility that provides assistance to residents in the administration of medication shall maintain: (b) A record of the medication administered to each resident. The record must include: (1) The type of medication administered; (2) The date and time that the medication was administered; (3) The date and time that a resident refuses, or otherwise misses, an administration of medication; and (4) Instructions for administering the medication to the resident that reflect the current order or prescription of the resident's physician.	Y 895		

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Y 895	Continued From page 5 This Regulation is not met as evidenced by: Based on record review on 2/25/10, the facility failed to ensure the medication administration record (MAR) was accurate for 2 of 2 residents (Resident #1 and #2). Severity: 1 Scope: 3	Y 895		
Y 920 SS=D	449.2748(1) Medication Storage NAC 449.2748 1. Medication, including, without limitation, any over-the-counter medication, stored at a residential facility must be stored in a locked area that is cool and dry. The caregivers employed by the facility shall ensure that any medication or medical or diagnostic equipment that may be misused or appropriated by a resident or any other unauthorized person is protected. Medication for external use only must be kept in a locked area separate from other medications. A resident who is capable of administering medication to himself without supervision may keep his medication in his room if the medication is kept in a locked container for which the facility has been provided a key. This Regulation is not met as evidenced by: Based on observation on 2/25/10, the facility failed to keep medications in a locked area.	Y 920		

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Y 920	Continued From page 6 Unlocked medications were observed in the caregiver's bedroom. This was a repeat deficiency from the 3/13/09 State Licensure survey. Severity: 2 Scope: 1	Y 920		
Y 991 SS=E	449.2756(1)(b) Alzheimer's Fac door alarm NAC 449.2756 1. The administrator of a residential facility which provides care to persons with Alzheimer's disease shall ensure that: (b) Operational alarms, buzzers, horns or other audible devices which are activated when a door is opened are installed on all doors that may be used to exit the facility. This Regulation is not met as evidenced by: Based on observation on 2/25/10, the facility failed to ensure that 1 of 2 exit doors had installed alarms that operated when the exit door was opened (back patio exit door). Severity: 2 Scope: 2	Y 991		
Y 992 SS=F	449.2756(1)(c) Alzheimer's Fac awake staff NAC 449.2756 1. The administrator of a residential facility which provides care to persons with Alzheimer's disease shall ensure that: (c) At least one member of the staff is awake and on duty at the facility at all times.	Y 992		

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Y 992	Continued From page 7 This Regulation is not met as evidenced by: Based on observation and interview on 2/25/10, the facility failed to ensure one member of the staff was awake at the facility at all times. The facility failed to have a February 2010 staff schedule. During an interview employee #2 stated he slept on the couch and got up four times per night to check on the residents. Employee #1 presented a staff schedule for January 2010 but was unable to explain how the shifts were covered for the 24 hour period. Severity: 2 Scope: 3	Y 992		
Y 994 SS=F	449.2756(1)(e) Alz fac -Dangerous items NAC 449.2756 1. The administrator of a residential facility which provides care to persons with Alzheimer's disease shall ensure that: (e) Knives, matches, firearms, tools and other items that could constitute a danger to the residents of the facility are inaccessible to the residents. This Regulation is not met as evidenced by: Based on observation on 2/25/10, the facility failed to ensure dangerous items were not accessible to 2 of 2 residents. Hammer, box of nails, shovels, weed wacker and hedge trimmer, were observed unsecured in the back yard guest house entrance.	Y 994		

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Y 994	Continued From page 8 Severity: 2 Scope: 3	Y 994		
Y 999 SS=F	449.2754(1)(g) Alzheimer's Facility-Toxic substances NAC 449.2756 1. The administrator of a residential facility which provides care to persons with Alzheimer's disease shall ensure that: (g) All toxic substances are not accessible to the residents of the facility. This Regulation is not met as evidenced by: Based on observation on 2/25/10, the facility failed to ensure toxic substances were inaccessible to 2 of 2 residents (gasoline, fertilizer, joint compound were observed unsecured in back yard guest house). Severity: 2 Scope: 2	Y 999		